

# Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

Date Stamp

CALIFORNIA  
2001/02  
FORM

460

Page 1 of 43

For Official Use Only

Statement covers period

from 01/01/2019

through 03/31/2019

Date of election if applicable:  
(Month, Day, Year)

SEE INSTRUCTIONS ON REVERSE

## 1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

- ☐ Officeholder, Candidate Controlled Committee  
☐ State Candidate Election Committee  
☐ Recall

(Also Complete Part 5.)

- ☒ General Purpose Committee  
☒ Sponsored  
☒ Small Contributor Committee  
☐ Political Party/Central Committee

- ☐ Ballot Measure Committee  
☐ Primary Formed  
☐ Controlled  
☐ Sponsored

(Also Complete Part 6.)

- ☐ Primary Formed Candidate/  
Officeholder Committee  
(Also Complete Part 7.)

## 2. Type of Statement:

- ☐ Pre-election Statement  
☐ Semi-annual Statement  
☐ Termination Statement  
☐ Amendment (Explain below)

- ☐ Quarterly Statement  
☒ Special Odd-Year Report  
☐ Supplemental Preelection  
Statement - Attach Form 495

## 3. Committee Information

I.D. NUMBER  
1275328

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Sacramento	CA	95814	(916)444-6670

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
------	-------	----------	-----------------

OPTIONAL: FAX/E-MAIL ADDRESS

(916) 444-6685/ / mmadrid@eichmancpa.com

364000-MM

## Treasurer(s)

NAME OF TREASURER

J. Richard Eichman

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Sacramento	CA	95814	(916) 442-2280

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
------	-------	----------	-----------------

OPTIONAL: FAX/E-MAIL ADDRESS

## 4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 04/16/2019

DATE

By J. Richard Eichman

SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on \_\_\_\_\_

DATE

By \_\_\_\_\_

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on \_\_\_\_\_

DATE

By \_\_\_\_\_

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on \_\_\_\_\_

DATE

By \_\_\_\_\_

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC  
State of California

# Recipient Committee Campaign Statement Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA  
FORM **460**

Page 2 of 43

## 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

**Related Committees Not Included in this Statement:** List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

## 6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT  
☐ OPPOSE

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

## 7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT  
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT  
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT  
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT  
☐ OPPOSE

Attach continuation sheets if necessary

# Campaign Disclosure Statement Summary Page

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period from 01/01/2019 through 03/31/2019	<b>CALIFORNIA FORM 460</b> Page 3 of 43 I.D. NUMBER 1275328
--	---

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

## Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions .....	Schedule A, Line 3	\$26,235.00	\$26,235.00
2. Loans Received .....	Schedule B, Line 7	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS .....	Add Lines 1 + 2	\$26,235.00	\$26,235.00
4. Nonmonetary Contributions .....	Schedule C, Line 3	\$0.00	\$0.00
5. TOTAL CONTRIBUTIONS RECEIVED .....	Add Lines 3 + 4	\$26,235.00	\$26,235.00

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$0.00	\$0.00
21. Expenditures Made	\$0.00	\$0.00

## Expenditures Made

6. Payments Made .....	Schedule E, Line 4	\$36,395.80	\$36,395.80
7. Loans Made .....	Schedule H, Line 7	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS .....	Add Lines 6 + 7	\$36,395.80	\$36,395.80
9. Accrued Expenses (Unpaid Bills) .....	Schedule F, Line 3	\$0.00	\$0.00
10. Nonmonetary Adjustment .....	Schedule C, Line 3	\$0.00	\$0.00
11. TOTAL EXPENDITURES MADE .....	Add Lines 8 + 9 + 10	\$36,395.80	\$36,395.80

## Expenditure Limit Summary for State Candidates

### 22. Cumulative Expenditures Made\* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

## Current Cash Statement

12. Beginning Cash Balance .....	Previous Summary Page, Line 16	\$89,814.95	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
13. Cash Receipts .....	Column A, Line 3 above	\$26,235.00	
14. Miscellaneous Increases to Cash .....	Schedule I, Line 4	\$0.00	
15. Cash Payments .....	Column A, Line 8 above	\$36,395.80	
16. ENDING CASH BALANCE .....	Add Lines 12 + 13 + 14, then subtract Line 15	\$79,654.15	
If this is a termination statement, Line 16 must be zero.			

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 \$0.00

## Cash Equivalents and Outstanding Debts

18. Cash Equivalents .....	See instructions on reverse	\$0.00
19. Outstanding Debts .....	Add Line 2 + Line 9 in Column B above	\$0.00

\*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.





# Schedule A Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from 01/01/2019 through 03/31/2019		<b>CALIFORNIA FORM 460</b>
Page 4 of 43		
NAME OF FILER ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce		I.D. Number 1275328

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/29/2019	ADESA Auctions Sacramento, CA 95826-3907 Memo Reference: INC24586	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$200.00	\$200.00	
2/14/2019	Alpert & Alpert Iron & Metal Los Angeles, CA 90023-4210 Memo Reference: INC24670	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
2/14/2019	Anesthesia Service Medical Group Advocacy Fund San Diego, CA 92119 Committee ID: 870598	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$200.00	\$200.00	
2/25/2019	Beazer Homes - Orange BREA, CA 92821-6072 Memo Reference: INC24697	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
3/20/2019	Bradford & Barthel LLP Sacramento, CA 95833-3673 Memo Reference: INC24821	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	

**SUBTOTAL**

## Schedule A Summary

1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.) .....	\$5,550.00
2. Amount received this period - unitemized contributions of less than \$100 .....	\$20,685.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .....	<b>TOTAL</b> \$26,235.00

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

FPPC Form 460 (JUNE/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)






Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2019	
through	03/31/2019	Page 5 of 43

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ChamberPAC Small Contributor Committee, Sponsored by CA Chamber of Commerce

I.D. Number  
1275328

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/14/2019	Bronco Wine Company Ceres, CA 95307 Memo Reference: INC24666	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
1/28/2019	Capital Insurance Group MONTEREY, CA 93940-5326 Memo Reference: INC24577	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
2/4/2019	Coca-Cola Company SAN LEANDRO, CA 94577-6715 Memo Reference: INC24623	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$200.00	\$200.00	
3/12/2019	Corona Millworks Chino, CA 91710-6936 Memo Reference: INC24788	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
3/11/2019	Crowe Horwath, LLP Sacramento, CA 95814-4498 Memo Reference: INC24764	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$200.00	\$200.00	
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)






Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2019	
through	03/31/2019	Page 6 of 43

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ChamberPAC Small Contributor Committee, Sponsored by CA Chamber of Commerce

I.D. Number  
1275328

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/7/2019	CRTKL Los Angeles, CA 90071-3005 Memo Reference: INC24641	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
3/18/2019	Delta Dental of California Rancho Cordova, CA 95670-6096 Memo Reference: INC24812	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$200.00	\$200.00	
1/25/2019	Empire CLS Worldwide Chauffeured Services El Segundo, CA 90245-4727 Memo Reference: INC24562	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
1/9/2019	Fairview Farms Rocklin, CA 95765-5711 Memo Reference: INC24437	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
3/11/2019	Flamingo Resort Hotel Santa Rosa, CA 95405-4795 Memo Reference: INC24768	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee






# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2019</u>		<b>CALIFORNIA FORM 460</b>
through <u>03/31/2019</u>		
		Page <u>7</u> of <u>43</u>
NAME OF FILER ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce		I.D. Number 1275328

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/30/2019	Fox Factory Inc. Watsonville, CA 95076-2406 Memo Reference: INC24573	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
3/11/2019	Freedom Financial Network San Mateo, CA 94402-2666 Memo Reference: INC24763	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
2/27/2019	Gaming Fund Group Oakland, CA 94606-5213 Memo Reference: INC24707	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
1/18/2019	Geo. M. Martin Company Emeryville, CA 94608-1121 Memo Reference: INC24487	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
3/15/2019	Hartmann Studios Richmond, CA 94804-2033 Memo Reference: INC24796	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.






SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2019</u>		<b>CALIFORNIA FORM 460</b>
through <u>03/31/2019</u>		
Page <u>8</u> of <u>43</u>		I.D. Number 1275328

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ChamberPAC Small Contributor Committee, Sponsored by CA Chamber of Commerce

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/4/2019	Impact Logistics Inc. MEMPHIS, TN 38133-4193 Memo Reference: INC24389	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
1/10/2019	International Transportation Long Beach, CA 90802 Memo Reference: INC24445	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
3/6/2019	Kakuichi America, Inc. TORRANCE, CA 90505-4013 Memo Reference: INC24756	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
2/5/2019	Kawneer Company Inc. Visalia, CA 93291 Memo Reference: INC24630	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
3/12/2019	La Jolla Beach & Tennis Club LA JOLLA, CA 92037-3237 Memo Reference: INC24779	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee








# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2019</u> through <u>03/31/2019</u>		<b>CALIFORNIA FORM 460</b>
Page <u>9</u> of <u>43</u>		
NAME OF FILER ChamberPAC Small Contributor Committee, Sponsored by CA Chamber of Commerce		I.D. Number 1275328

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2019	Lewis Operating Corporation Upland, CA 91786 Memo Reference: INC24435	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
3/4/2019	Markstein Beverage Company SACRAMENTO, CA 95838-2034 Memo Reference: INC24734	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
2/8/2019	Marquez Brothers International San Jose, CA 95138-1857 Memo Reference: INC24644	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$150.00	\$150.00	
2/14/2019	MedImpact San Diego, CA 92131-5152 Memo Reference: INC24669	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$150.00	\$150.00	
3/22/2019	Merchants Building Maintenance Monterey Park, CA 91754-3615 Memo Reference: INC24832	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$200.00	\$200.00	
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee





# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2019</u> through <u>03/31/2019</u>		<b>CALIFORNIA FORM 460</b>
Page <u>10</u> of <u>43</u>		
NAME OF FILER ChamberPAC Small Contributor Committee, Sponsored by CA Chamber of Commerce		I.D. Number 1275328

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/7/2019	Mitsubishi Cement Corporation LUCERNE VALLEY, CA 92356-8179 Memo Reference: INC24425	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
3/15/2019	***RETURNED*** Monterey Bay Aquarium Research Institute Moss Landing, CA 95039-9644	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		(\$100.00)	(\$100.00)	
3/12/2019	Monterey Peninsula Country Club Pebble Beach, CA 93953-2542 Memo Reference: INC24781	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
1/17/2019	National Wire & Cable Corporation LOS ANGELES, CA 90031-1726 Memo Reference: INC24480	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
1/8/2019	NRC Environmental Services Company LONG BEACH, CA 90807-3336 Memo Reference: INC24433	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee






# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2019</u> through <u>03/31/2019</u>		<b>CALIFORNIA FORM 460</b>
Page <u>11</u> of <u>43</u>		
NAME OF FILER ChamberPAC Small Contributor Committee, Sponsored by CA Chamber of Commerce		I.D. Number 1275328

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/7/2019	Ocean Mist Farms Castroville, CA 95012-3232 Memo Reference: INC24424	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$150.00	\$150.00	
1/4/2019	Office Star Products Ontario, CA 91761 Memo Reference: INC24388	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
1/23/2019	OnTrac Santa Ana, CA 92705-5501 Memo Reference: INC24550	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
1/23/2019	Paradise Valley Estates Fairfield, CA 94533-9711 Memo Reference: INC24551	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
1/30/2019	Payden & Rygel LOS ANGELES, CA 90071-1504 Memo Reference: INC24572	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$200.00	\$200.00	
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee






# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2019</u>		<b>CALIFORNIA FORM 460</b>
through <u>03/31/2019</u>		
		Page <u>12</u> of <u>43</u>
NAME OF FILER ChamberPAC Small Contributor Committee, Sponsored by CA Chamber of Commerce		I.D. Number 1275328

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/31/2019	Petvet Care Centers-Aptos Aptos, CA 95003-4929 Memo Reference: INC24597	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$200.00	\$200.00	
1/17/2019	Players Casino Ventura, CA 93003-7211 Memo Reference: INC24485	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
1/4/2019	Santini Foods, Inc. San Lorenzo, CA 94580-1811 Memo Reference: INC24383	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
1/30/2019	Spates Fabricators, Inc. Thermal, CA 92274-9620 Memo Reference: INC24566	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
1/30/2019	Stratford Schools Inc. Saratoga, CA 95070-4661 Memo Reference: INC24593	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
<b>SUBTOTAL</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)




Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2019	
through	03/31/2019	Page 13 of 43

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

I.D. Number  
1275328

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/1/2019	The Outdoor Recreation Group Los Angeles, CA 90032-3704 Memo Reference: INC24617	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
3/19/2019	Valin Corporation San Jose, CA 95131-1721 Memo Reference: INC24815	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
3/11/2019	Ygrene Energy Fund Petaluma, CA 94954-6902 Memo Reference: INC24762	 <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL</b>				\$5,550.00		

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule B – Part 1 Loans Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE B - PART 1

Statement covers period from 01/01/2019 through 03/31/2019	<b>CALIFORNIA FORM 460</b>
Page 14 of 43	I.D. NUMBER 1275328

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR  PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR  PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR  PER ELECTION**
					DATE DUE		DATE INCURRED	

## SUBTOTALS

## Schedule B Summary

1. Loans received this period. \_\_\_\_\_  
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period \_\_\_\_\_  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) \_\_\_\_\_ **Net** \_\_\_\_\_  
Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number)

(Enter (e) on  
Schedule E, Line 3)

\* Amounts forgiven or paid by  
another party also must be  
reported on Schedule A.

\*\* If required.

\*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule B - Part 2

## Loan Guarantors

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from <u>01/01/2019</u> through <u>03/31/2019</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>15</u> of <u>43</u>
I.D. Number 1275328	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
<b>SUBTOTAL</b>					Enter on Summary Page, Line 17 only.	

# Schedule C

## Nonmonetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE C

Statement covers period from <u>01/01/2019</u> through <u>03/31/2019</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>16</u> of <u>43</u>
I.D. Number 1275328	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL**

## Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.  
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100 .....
- Total nonmonetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... **TOTAL**

\*Contributor Codes  
IND - Individual  
COM- Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee



# Schedule D

## Summary of Expenditures

### Supporting/Opposing Other Candidates, Measures and Committees

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE D

Statement covers period from 01/01/2019 through 03/31/2019	<b>CALIFORNIA FORM 460</b>
Page 17 of 43	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

I.D. NUMBER  
1275328

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/16/2019	Payee Name: Salas for Assembly 2020 Candidate Name: Rudy Salas State Assembly Person District 32 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	2020P: \$1,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
1/24/2019	Payee Name: Tom Daly for Assembly 2020 Candidate Name: Tom Daly State Assembly Person District 69 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	2020P: \$1,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
1/24/2019	Payee Name: Glazer for Senate 2020 Candidate Name: Steve Glazer State Senator District 07 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,500.00	\$2,500.00	2020P: \$5,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL</b>						

## Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) ..... \$35,000.00
- Unitemized contributions and independent expenditures made this period of under \$100 ..... \$0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL** \$35,000.00

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

**Schedule D  
(Continuation Sheet)  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 01/01/2019

through 03/31/2019

**CALIFORNIA  
FORM 460**

Page 18 of 43

NAME OF FILER

ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

I.D. NUMBER  
1275328

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/1/2019	Payee Name: Autumn Burke for Assembly 2020 Candidate Name: Autumn Burke State Assembly Person District 62 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Non-Monetary Contribution  <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	2020P: \$1,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/1/2019	Payee Name: Heath Flora for Assembly 2020 Candidate Name: Heath Flora State Assembly Person District 12 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$1,000.00	\$1,000.00	2020P: \$1,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/1/2019	Payee Name: James Ramos for Assembly 2020 Candidate Name: James Ramos State Assembly Person District 10 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	2020P: \$1,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/5/2019	Payee Name: Evan Low for Assembly 2020 Candidate Name: Evan Low State Assembly Person District 28 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$3,000.00	\$3,000.00	2020P: \$3,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

**SUBTOTAL**

**Schedule D  
(Continuation Sheet)  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 01/01/2019

through 03/31/2019

**CALIFORNIA  
FORM 460**

Page 19 of 43

NAME OF FILER

ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

I.D. NUMBER  
1275328

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/7/2019	Payee Name: Jacqui Irwin for State Assembly 2020 Candidate Name: Jacqui Irwin State Assembly Person District 44 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Non-Monetary Contribution  <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	2020P: \$1,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/14/2019	Payee Name: Ling Ling Chang for Senate 2020 Candidate Name: Ling Ling Chang State Senator District 29 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	2020P: \$3,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/14/2019	Payee Name: Robert Rivas for Assembly 2018 Candidate Name: Robert Rivas State Assembly Person District 30 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure	Debt Retirement	\$2,500.00	\$2,500.00	2018P: \$2,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/26/2019	Payee Name: Hertzberg for State Controller 2022 Candidate Name: Robert Hertzberg State Controller Jurisdiction: Statewide	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$2,000.00	2022P: \$2,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

**SUBTOTAL**

**Schedule D  
(Continuation Sheet)  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 01/01/2019

through 03/31/2019

**CALIFORNIA  
FORM 460**

Page 20 of 43

NAME OF FILER

ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

I.D. NUMBER  
1275328

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/26/2019	Payee Name: Shannon Grove for Senate 2022 Candidate Name: Shannon Grove State Senator District 16 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Non-Monetary Contribution  <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	2022P: \$1,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/27/2019	Payee Name: Tyler Diep for Assembly 2020 Candidate Name: Tyler Diep State Assembly Person District 72 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	2020P: \$1,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/1/2019	Payee Name: Jay Obernolte for Assembly 2020 Candidate Name: Jay Obernolte State Assembly Person District 33 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	2020P: \$1,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/7/2019	Payee Name: Friends of Frank Bigelow for Assembly 2020 Candidate Name: Frank Bigelow State Assembly Person District 05 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	2020P: \$1,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

**SUBTOTAL**

**Schedule D**  
**(Continuation Sheet)**  
**Summary of Expenditures**  
**Supporting/Opposing Other**  
**Candidates, Measures and Committees**

Type or print in ink.  
 Amounts may be rounded  
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 01/01/2019

through 03/31/2019

**CALIFORNIA**  
**FORM 460**

Page 21 of 43

NAME OF FILER

ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

I.D. NUMBER  
 1275328

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/7/2019	Payee Name: Christy Smith for Assembly 2020 Candidate Name: Christy Smith State Assembly Person District 38 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Non-Monetary Contribution  <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	2020P: \$1,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/11/2019	Payee Name: O'Donnell for Assembly 2020 Candidate Name: Patrick O'Donnell State Assembly Person District 70 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	2020P: \$1,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/19/2019	Payee Name: Sharon Quirk-Silva for Assembly 2020 Candidate Name: Sharon Quirk-Silva State Assembly Person District 65 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	2020P: \$1,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/27/2019	Payee Name: Ed Chau for Assembly 2020 Candidate Name: Ed Chau State Assembly Person District 49 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure		\$2,500.00	\$2,500.00	2020P: \$2,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

**SUBTOTAL**

**Schedule D  
(Continuation Sheet)  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 01/01/2019

through 03/31/2019

**CALIFORNIA  
FORM 460**

Page 22 of 43

NAME OF FILER

ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

I.D. NUMBER  
1275328

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/27/2019	Payee Name: Wilk for Senate 2020 Candidate Name: Scott Wilk State Senator District 21 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Non-Monetary Contribution  <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$2,000.00	2020P: \$4,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Nonmonetary Contribution  <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL</b>				\$35,000.00		

# Schedule E Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period from 01/01/2019 through 03/31/2019		<b>CALIFORNIA FORM 460</b>  Page 23 of 43
I.D. NUMBER 1275328		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
J. Richard Eichman Sacramento, CA 95814	PRO			\$240.00
Salas for Assembly 2020 Sacramento, CA 95814	CTB			\$1,500.00
Committee ID: 1414982 Tom Daly for Assembly 2020 Sacramento, CA 95814	CTB			\$1,500.00
Committee ID: 1415111				

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

## Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) .....	\$36,395.80
2. Unitemized payments made this period of under \$100. ....	\$0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) .....	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .....	<b>TOTAL</b> \$36,395.80

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 01/01/2019		
through 03/31/2019		Page 24 of 43
NAME OF FILER ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce		I.D. NUMBER 1275328

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Glazer for Senate 2020 Orinda, CA 94563	CTB			\$2,500.00
Committee ID: 1393610				
Autumn Burke for Assembly 2020 Sacramento, CA 95814	CTB			\$1,500.00
Committee ID: 1414347				
Heath Flora for Assembly 2020 Hilmar, CA 95324	CTB			\$1,000.00
Committee ID: 1414675				
James Ramos for Assembly 2020 Sacramento, CA 95814	CTB			\$1,500.00
Committee ID: 1414557				
Evan Low for Assembly 2020 Sacramento, CA 95815	CTB			\$3,000.00
Committee ID: 1414197				

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**



# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 01/01/2019		
through 03/31/2019		Page 25 of 43
		I.D. NUMBER 1275328

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Jacqui Irwin for State Assembly 2020 Sacramento, CA 95814  Committee ID: 1414701	CTB			\$1,500.00
Ling Ling Chang for Senate 2020 Hilmar, CA 95324  Committee ID: 1407243	CTB			\$1,500.00
Robert Rivas for Assembly 2018 Sacramento, CA 95814  Committee ID: 1399486	CTB	Debt Retirement		\$2,500.00
J. Richard Eichman Sacramento, CA 95814	PRO			\$725.70
Hertzberg for State Controller 2022 Sacramento, CA 95814  Committee ID: 1413987	CTB			\$2,000.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 01/01/2019		
through 03/31/2019		Page 26 of 43
NAME OF FILER ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce		I.D. NUMBER 1275328

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Shannon Grove for Senate 2022 Sacramento, CA 95814	CTB			\$1,500.00
Committee ID: 1414696				
Tyler Diep for Assembly 2020 Santa Ana, CA 92704	CTB			\$1,500.00
Committee ID: 1414174				
Jay Obernolte for Assembly 2020 Sacramento, CA 95814	CTB			\$1,500.00
Committee ID: 1414881				
Friends of Frank Bigelow for Assembly 2020 Sacramento, CA 95814	CTB			\$1,500.00
Committee ID: 1414525				
Christy Smith for Assembly 2020 Sacramento, CA 95814	CTB			\$1,500.00
Committee ID: 1414296				

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 01/01/2019		
through 03/31/2019		Page 27 of 43
NAME OF FILER ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce		I.D. NUMBER 1275328

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
O'Donnell for Assembly 2020 Sacramento, CA 95814  Committee ID: 1415498	CTB			\$1,500.00
J. Richard Eichman Sacramento, CA 95814	PRO			\$430.10
Sharon Quirk-Silva for Assembly 2020 Sacramento, CA 95814  Committee ID: 1414412	CTB			\$1,500.00
Ed Chau for Assembly 2020 Sacramento, CA 95814  Committee ID: 1414235	CTB			\$2,500.00
Wilk for Senate 2020 San Diego, CA 92119  Committee ID: 1392822	CTB			\$2,000.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL** \$36,395.80

# Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE F

Statement covers period  
from 01/01/2019  
through 03/31/2019

CALIFORNIA  
FORM 460

Page 28 of 43

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

I.D. NUMBER  
1275328

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTALS**

## Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** \_\_\_\_\_
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** \_\_\_\_\_
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** \_\_\_\_\_  
May be a negative number.

# Schedule G

## Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE G

Statement covers period  
from 01/01/2019  
through 03/31/2019

CALIFORNIA  
FORM **460**

Page 29 of 43

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

I.D. NUMBER  
1275328

NAME OF AGENT OR INDEPENDENT CONTRACTOR

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\***

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule H – Loans Made to Others\*

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE H

Statement covers period

from 01/01/2019

through 03/31/2019

CALIFORNIA  
FORM **460**

Page 30 of 43

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
ChamberPAC Small Contributor Committee, Sponsored by CA Chamber of Commerce

I.D. NUMBER  
1275328

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR  PER ELECTION**
					DATE DUE		DATE INCURRED	
				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR  PER ELECTION**
					DATE DUE		DATE INCURRED	
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.			<b>SUBTOTALS</b>					

(Enter (e) on  
Schedule I, Line 3)

## Schedule H Summary

1. Loans made this period .....  
(Total Column (b) plus unitemized loans less than \$100.)

2. Payments received on loans .....  
(Total Column (c) plus unitemized payments less than \$100.)

3. Net change this period. (Subtract Line 2 from Line 1.) ..... **NET**  
(Enter the net here and on the Summary Page, Column A, Line 7.)

\*\* If Required

(May be a negative number)

# Schedule I

## Miscellaneous Increases to Cash

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE I

Statement covers period

from 01/01/2019

through 03/31/2019

CALIFORNIA  
FORM **460**

Page 31 of 43

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
ChamberPAC Small Contributor Committee,Sponsored by CA Chamber of Commerce

I.D. NUMBER  
1275328

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL** \$ .00

### Schedule I Summary

- Increases to cash of \$100 or more this period..... \$ .00
- Unitemized increases to cash under \$100 this period. .... \$ .00
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... \$ .00
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)..... **TOTAL** \$ .00

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

Memo Reference: INC24383

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24388

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24389

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24424

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---



Memo Reference: INC24425

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24433

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24435

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24437

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24445

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24480

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24485

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24487

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24623

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24630

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24641

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24644

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24666

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24669

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24670

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24586

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24593

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24597

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24550

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24551

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24562

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24566

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24572

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24573

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24577

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24617

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24697

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24707

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24734

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24756

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24762

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24763

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---



Memo Reference: INC24764

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24768

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24779

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24781

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24788

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24796

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24812

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24815

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24821

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

Memo Reference: INC24832

Intermediary: California Chamber of Commerce, 1215 K Street, Ste. 1400 Sacramento, CA 95814

---

---

---

---